

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

CH

PLAINTIFF		COURT CASE NUMBER
Terrell Jones		08C0461 08c0461
DEFENDANT		TYPE OF PROCESS
Dr. Carlos Altez, et al.		S/C
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
→	Salvador Gordinez, Director, Cook County Jail	
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)		
AT	CCJ, C/O Legal Dept. 2700 S. California Ave., 2nd. Flr, Div. 5, Chicago, IL 60608	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		Number of process to be served with this Form - 285
Terrell Jones, #2007-0057770 Cook County Jail P.O. Box 089002 Chicago, IL 60608		1
		Number of parties to be served in this case
		2
		Check for service on U.S.A.
		0

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
Fold**F I L E D**

Fold

Signature of Attorney or other Originator requesting service on behalf of:

MICHAEL W. DOBBINS

CLERK, U.S. DISTRICT COURT

MAR 04 2008 EA

Mar 04 2008

DATE

02-04-08

PLAINTIFF

TELEPHONE NUMBER

TD

Date

02-04-08

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	TD	Date
<b>2 of 2</b>		No. <b>24</b>	No. <b>24</b>			<b>02-04-08</b>

I hereby certify and return that  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

Officer Ronna Farnandis

 A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service Time

2-22-08 10:00 pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges (including, endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
<b>One</b>	<b>Service fee same</b>	<b>case &amp; location. See process</b>				

REMARKS: Sheet # 1 for charges.